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Box Patent Application		
Assistant Commissioner for Patents	· · ·	
Washington, District of Columbia 20231	· Q	
Sir:	34	
Please file the following enclosed patent application papers:	S.D. 8.176	
Applicant #1, Name: Armando Doming	uez 0	
Applicant #2, Name: N/A	10	
Tille: Handle Multi-purpose Te	ool N =	
Declaration: Date Signed: 07/31/2003		
Drawing(s): Nr. of Sheets Enc.: Formal: 8 Informal: _		
☑ Small Entity Declaration of Inventor(s) ☐ SED of I		
Assignment enclosed with cover sheet and recordal fee; please re	ecord and return.	
Check for \$ 375.00 for:		
\boxtimes \$ 375.00 for filing fee (not more than thr	ee independent claims and twenty total claims are presented)	
\square \$ N/A . additional if Assignment is enc		
adollional II Assignment is end	nosed for recordal.	
☐ Information Disclosure Statement, Form PTO-1449, and listed re	eferences.	
☐ Disclosure Document Program reference letter.		
Pursuant to 35 U.S.C. §119(e)(i), applicant(s) claim priority of P	rovisional Patent Application Ser. Nr	
filed N/A		
Request Under MPEP § 707.07(j): The undersigned, a pro-	se applicant, respectfully requests that if the Examiner finds	
patentable subject matter disclosed in this application, but feels that Applicant's present claims are not entirely suitable, the		
Examiner draft one or more allowable claims for applicant.		
Very respectfully, Federal Satellite Low		
	N/A	
Applicant #1 Signature	Applicant #2 Signature	
2650 Hyw. 301 South	N/A	
Address (Send Correspondence Here)	Address	
Jesup, GA 31599	N/A	

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Washington, District of Columbia 20231

Fee Transmittal

First-Named Applicant <u>Armando Dominguez</u> Title of Invention: " <u>Handle Multi-purpose</u>		
Total Payment Enclosed (From Calculation Below): \$ 375.00		☐ Money Order
Sir:		
Enclosed is the following small entity filing fee for the above patent application	on:	
Fee Code Fee Description		Fee (\$)
214 Provisional Pat. Appn. Filing Fee	¥	
201 Basic Utility Appn. Filing Fee	• •	375.00
206 Basic Design Appn. Filing Fee		275 00
Subtotal (1)		375.00
203 Total Claims: <u>14</u> -20 = ; X	(fee for each claim over 20) =	0
202 Tot. Indep. Claims <u>1</u> - 3 =; X	(fee for each indep. claim over 3) =	0
Subtotal (2)		
Total Payment Enclosed [Sum of Subtotals (1) and (2)]	· •	375.00
Very respectfully,		
Signature of First-Named Applicant Arm ando Domingue 3 Print Name of First-Named Applicant		
Federal Satellite Low	·	
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Jesup. GA 31599		•